

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

IRA MERCER

Write the full name of each plaintiff.

CV
(Include case number if one has been assigned)

-against-

COMPLAINT

NEW YORK CITY Police Dept-47 Precinct, DETECTIVE
CHRISTOPHER SALLY, OFFICER SUTTON, DISTRICT ATTORNEY
OFFICE AND DARCEL D. CLARK, BROOKS COUNTY Family Court
and SUSAN SCHLEIFER LEVY COURT ATTORNEY
REFEREE

Do you want a jury trial?
☒ Yes ☐ No

Write the full name of each defendant. If you need more space, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed above must be identical to those contained in Section II.

NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal-court jurisdiction in your case?

☒ Federal Question

☐ Diversity of Citizenship

A. If you checked Federal Question

Which of your federal constitutional or federal statutory rights have been violated?

4TH AMENDMENT: UNREASONABLE SEARCH AND SEIZURES / ~~IMPRISONMENT~~ FALSE
 5TH AMENDMENT: DOUBLE JEOPARDY
 4TH AMENDMENT: DUE PROCESS

B. If you checked Diversity of Citizenship**1. Citizenship of the parties**

Of what State is each party a citizen?

The plaintiff, _____, is a citizen of the State of _____
 (Plaintiff's name)

 (State in which the person resides and intends to remain.)

or, if not lawfully admitted for permanent residence in the United States, a citizen or subject of the foreign state of _____

 If more than one plaintiff is named in the complaint, attach additional pages providing information for each additional plaintiff.

If the defendant is an individual:

The defendant, _____, is a citizen of the State of
(Defendant's name)

or, if not lawfully admitted for permanent residence in the United States, a citizen or
subject of the foreign state of

If the defendant is a corporation:

The defendant, _____, is incorporated under the laws of
the State of _____

and has its principal place of business in the State of _____

or is incorporated under the laws of (foreign state) _____

and has its principal place of business in _____.

If more than one defendant is named in the complaint, attach additional pages providing
information for each additional defendant.

II. PARTIES

A. Plaintiff Information

Provide the following information for each plaintiff named in the complaint. Attach additional
pages if needed.

<u>IRA</u>	<u></u>	<u>MERCER</u>
First Name	Middle Initial	Last Name
<u>113 FATHER ZEISER PL APT 24</u>		
Street Address		
<u>BRONX</u>	<u>NY</u>	<u>10468</u>
County, City	State	Zip Code
<u>914-662-7288</u>	<u>iramercer7@gmail.com</u>	
Telephone Number	Email Address (if available)	

B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1: DARCEL CLARK
 First Name Last Name
BRONX COUNTY DISTRICT ATTORNEY
 Current Job Title (or other identifying information)
198 E. 161 STREET - DISTRICT ATTORNEY'S OFFICE
 Current Work Address (or other address where defendant may be served)
BRONX NY 10451
 County, City State Zip Code

Defendant 2: SUSAN SCHIEFFER
 First Name Last Name
COURT ATTORNEY REFEREE
 Current Job Title (or other identifying information)
BRONX COUNTY FAMILY COURT - 900 Sheridan AVE
 Current Work Address (or other address where defendant may be served)
BRONX NY 10451-3317
 County, City State Zip Code

Defendant 3: CHRISTOPHER SALLY
 First Name Last Name
DETECTIVE # 0000
 Current Job Title (or other identifying information)
NEW YORK CITY POLICE DEPT-47 Precinct 0000; 4111 LACONICA AVE.
 Current Work Address (or other address where defendant may be served)
BRONX NY 10466
 County, City State Zip Code

Defendant 4:

SUTTON
First Name Last Name
POLICE OFFICER #9820
Current Job Title (or other identifying information)
NEW YORK CITY POLICE DEPT 47 PRECINCT - 4111 LECONICA AVE
Current Work Address (or other address where defendant may be served)
BRONX NY 10466
County, City State Zip Code

III. STATEMENT OF CLAIM

Place(s) of occurrence: TRANSIT POLICE STATION - 161 ST YANKEE STADIUM / 4 TRAZU LINE

Date(s) of occurrence: APRIL 28, 2023

FACTS:

State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and what each defendant personally did or failed to do that harmed you. Attach additional pages if needed.

SEE ATTACHMENTS - 1 COMPLAINT - 2 AFFIDAVIT OF CLAIM,
3 - Settlement Statement, 4 - AFFIDAVIT (1), and
4 - NOTICE OF INTENT TO SUE

INJURIES:

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

THE PLAINTIFF INJURIES ARE THE ILLEGAL INVASION OF A LEGAL RIGHT, (i.e.) THE INVASION OF THE PLAINTIFF'S CONSTITUTIONAL RIGHT BY THE DEFENDANT'S, CAUSING THE PLAINTIFF TO EXPERIENCE: EMOTIONAL DISTRESS, MENTAL ANGUISH BECAUSE OF LOSS OF FREEDOM, HUMILIATION AND EMBARRASMENT.

IV. RELIEF

State briefly what money damages or other relief you want the court to order.

THE PLAINTIFF ASK THIS COURT TO ~~ORDER THE DEFENDANT TO~~
~~TO~~ GRANT RELIEF TO THE PLAINTIFF IN THE AMOUNT OF
\$ 3,000,000.00 THREE MILLION DOLLARS.

V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

<u>04-11-2024</u>		<u><i>Ira Mercer</i></u>
Dated		Plaintiff's Signature
<u>IRA</u>		<u>MERCER</u>
First Name	Middle Initial	Last Name
<u>113 FATHER ZEISER PL, APT 2A</u>		
Street Address		
<u>BROOK</u>	<u>NY</u>	<u>10468</u>
County, City	State	Zip Code
<u>94-662-7288</u>	<u>iramercer7@gmail.com</u>	
Telephone Number	Email Address (if available)	

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:

☐ Yes ☐ No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.

Plaintiff,
Ira Mercer

05-22-2023

Vs.

Defendants,
Sue Levy, Court Attorney Referee
Family Court Of The State Of New York,
County Of Bronx

COMPLAINT

Officer:Sutton #9820
New York Police Department:
Command 47 Precinct

Christopher Sally / Detective
New York Police Department:
47 Precinct Squad

Darcel D. Clark / District Attorney
Office Of The District Attorney,
Bronx County

On April 28, 2023 Plaintiff was stopped by a transit police officer for allegedly not paying his public fare at 161 street yankee stadium. While the transit policeman ran the plaintiff name through the database, the officer found an arrest warrant. The officer immediately called the 47th precinct and Detective Christopher Sally came to pick up the plaintiff. See exhibit (a) letters from District Attorney's Office (w) arrest #

While being detained at the 47th precinct, the plaintiff asked Detective Christopher Sally, " why am i being detained?" Detective Christopher Sally said, " you have a warrant for a larceny and harassment order" plaintiff stated, " those cases has been dismissed since November of last year" see exhibit (b) Certificate Of Disposition

Plaintiff was unlawfully detained for several hours for a case that was dismissed in November 2,2022. Plaintiff suffered injuries and damages while being unlawfully detained, protected Constitutional Rights has been violated under the color of state law by the New York City Police Department 47th Precinct, Detective Christopher Sally and police officer:Sutton #9820.

The Office Of The District Attorney and District Attorney Darcel D. Clark is being charged with Negligence, because The Office Of The District Attorney and District Attorney Darcel D. Clark failed to take proper care in publicizing in their database the dismissal of the plaintiff's charges. See exhibit (b)

If the Office Of The District Attorney and District Attorney Darcel D. Clark had taken the proper care in publicizing the plaintiff's dismissal, the plaintiff would not have been detained for an arrest warrant.

Family Court Of The State Of New York, County Of Bronx and Sue Levy, Court Attorney Referee are being charged for conspiring against the plaintiff under color of state law. Sue Levy, Court Attorney Referee has been notified by the plaintiff and the plaintiff lawful counsel see exhibit (c).

Sue Levy, Court Attorney Referee has been unlawfully ordering the plaintiff to entertain court orders and appearances for a dismissed case. See exhibit (b)

DAMAGES

1-False Arrest

The New York City Police Department 47th Precinct, Christopher Sally / Detective and Police Officer:Sutton #9820, who intentionally and wrongfully limited and restricted the plaintiff's personal freedoms, and against the plaintiff's consent of false arrest and imprisonment.

2-Negligences

The Office Of The District Attorney and District Attorney Darcel D. Clark, failure to exercise the degree of care expected in their respective office duties to file and or publicize the plaintiff dismissal charges, protecting him from the circumstances within New York state laws that could have prevented unreasonable risk of harm in a particular situation.

3-Conspiracy

Family Court Of The State Of New York, County Of Bronx and Sue Levy, Court Attorney Referee has conspired against the plaintiff's Constitutional Rights under color of state law to oppress, threaten and intimidate the plaintiff if he doesn't appear in court. See exhibit (d) for an unwarranted court appearance.

Relief Being Sought

1-False Arrest 1,000,000.00 in Damage

The New York City Police Department 47th Precinct, Detective Christopher Sally and Police Officer:Sutton #9820.

2-Negligences 1,000,000.00 in Damage

The Office Of The District Attorney, Bronx County and District Attorney Darcel D. Clark.

3-Conspiracy 1,000,000.00 in Damage

Family Court Of The State Of New York, County Of Bronx and Sue Levy, Court Attorney Referee.


Damage Relief Total: \$3,000,000.00 / Three Million Dollars.

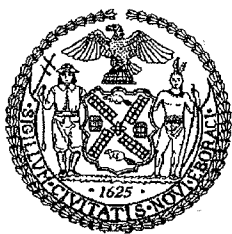
IRA MERCER

CLAIMANT: IRA MERCER

I declare under penalty of perjury that everything in the above complaint is from the claimant and the foregoing is true and correct. **28 U.S.C. 1746**

DATE: 05/22/2023

x 
CLAIMANT Signature



THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER
1 CENTRE STREET, NEW YORK, N.Y. 10007-2341

Brad Lander
COMPTROLLER

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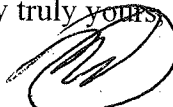
Date: 10/30/2023
RE: Disallowance-Over 90 Days
IRA MERCER
Claim number: 2023PI016829
Your Claim/Policy#: N/A

IRA MERCER
113 FATHER ZEISER PLACE APT.2A
BRONX, NY 10468

Dear Claimant:

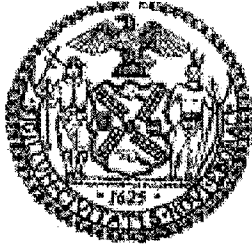
We regret to inform you that your claim has been disallowed. Your claim was not filed within 90 days from the date of occurrence as required by the General Municipal Law Section 50-e. Claims must be filed with either the New York City Office of The Comptroller, the New York City Law Department, the New York City Board of Education or the New York City Health and Hospitals Corporation, depending on the substance of the claim.

If you have been scheduled for a Comptroller's hearing (50-h, General Municipal Law), please deem the hearing canceled.

Very truly yours,

M. VALENTINO

Bureau of Law & Adjustment

PERSONAL INJURY
(212) 669-4765



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THE CITY OF NEW YORK
OFFICE OF THE COMPTROLLER
CLAIMS AND ADJUDICATIONS
1 CENTRE STREET ROOM 1200
NEW YORK, N.Y. 10007-2341

Brad Lander
COMPTROLLER

Date: 11/30/2023
Claim Number: 2023PI039762
RE: Acknowledgment of Claim
Your Claim/Policy#:

IRA MERCER
113 FATHER ZEISER PL APT 2A
BRONX NY 10468

Dear Claimant:

We acknowledge receipt of your claim, which has been assigned the claim number shown above. Please refer to this claim number in any correspondence or inquiry you may have with our office.

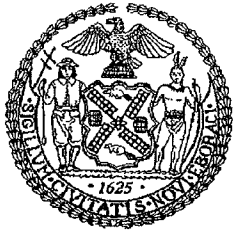
We will do our best to investigate and, if possible, settle your claim. However, if we are unable to resolve your claim, **any lawsuit against the City must be started within one year and ninety days from the date of the occurrence.**

If you have any questions regarding your claim, you may contact us at 212-669-4729 for claims involving personal injury.

If you need to communicate in a language other than English, please let us know, and we will make translation services available to you.

Sincerely,

Bureau of Law & Adjustment



THE CITY OF NEW YORK OFFICE OF THE COMPTROLLER
1 CENTRE STREET, NEW YORK, N.Y. 10007-2341

Brad Lander
COMPTROLLER

015 - 155

Date: 12/07/2023
RE: Disallowance-Over 90 Days
IRA MERCER
Claim number: 2023PI039762
Your Claim/Policy#:

IRA MERCER
113 FATHER ZEISER PL APT 2A
BRONX, NY 10468

Dear Claimant:

We regret to inform you that your claim has been disallowed. Your claim was not filed within 90 days from the date of occurrence as required by the General Municipal Law Section 50-e. Claims must be filed with either the New York City Office of The Comptroller, the New York City Law Department, the New York City Board of Education or the New York City Health and Hospitals Corporation, depending on the substance of the claim.

If you have been scheduled for a Comptroller's hearing (50-h, General Municipal Law), please deem the hearing canceled.

Very truly yours,

M. VALENTINO 
Bureau of Law & Adjustment

PERSONAL INJURY
(212) 669-4765